Fairfax-Falls Church Community Services Board November 20, 2013

The Board met in regular session at the Fairfax County Government Center, 12000 Government Center Parkway, Conference Rooms 2 and 3, in Fairfax, VA.

<u>The following CSB members were present</u>: Ken Garnes, Chair; Gary Ambrose, Pam Barrett, Susan Beeman, Jessica Burmester, Mark Gross, Kate Hanley, Suzette Kern, Paul Luisada, Lori Stillman, Rob Sweezy, Diane Tuininga, Jeff Wisoff, Jane Woods and Spencer Woods

The following CSB members were absent: Juan Pablo Segura

<u>The following CSB staff was present</u>: George Braunstein, Peggy Cook, Jean Hartman, Kevin Lafin, Dave Mangano, Victor Mealy, Lisa Potter, Lyn Tomlinson, Jim Stratoudakis, Daryl Washington and Laura Yager

1. Meeting Called to Order

Ken Garnes called the meeting to order at 7:40 p.m.

2. Matters of the Public

None.

3. Amendments to the Meeting Agenda

None.

4. Approval of the Minutes

Suzette Kern offered a motion for approval of the October 23, 2013 Board work session as well as meeting minutes of the Fairfax-Falls Church Community Services Board which was seconded and passed.

5. Matters of the Board

- Jane Woods reported next month the Advisory Group to the Fairfax County Redevelopment and Housing Authority will be addressing steps for allocation in light of reduced funding. The recommendations include:
 - o 35% of an individual's income to be applied for assisted housing.
 - Fairfax will not be supplementing the Department of Housing and Urban Development funds, except for two bedroom units that have experienced a significant funding decrease.
 - o Enforce the regulation currently in place that provides for termination of any family that has not fully disclosed income and entered a repayment agreement.
 - If funding reductions continue, identify those most able to absorb a decrease and ensure support for those that, if a reduction were applied, would become homeless.

November 20, 2013 Page 1 of 6

• Referencing the 2014 CSB Executive Director's goals distributed, Mr. Garnes indicated the need to quantify the goals in order to apply metrics. Following review of the goals, Board members were requested to provide feedback in an effort to establish a mechanism for the evaluation next year.

6. Executive Directors Report

- Indicating a full presentation will be provided to the CSB Board in December on healthcare integration, George Braunstein noted a primary care clinic is now operational at the CSB Gartlan facility. The success of this project is due in large part to the continuing efforts of CSB staff Laura Yager, Joan Rodgers and Lisa Potter.
- Mr. Braunstein shared a letter from the mother of two children receiving services through
 the Infant and Toddler Connection program, praising the case worker who went above
 and beyond in ensuring the best possible services were received, including medical
 attention. With the Board's permission, a letter will be sent on their behalf to the staff
 member.
- While noting the confidential nature of discussing any specifics of the Bath County event,
 Mr. Braunstein provided some information and clarification on the involuntary
 commitment process and emergency services currently receiving so much attention:
 - Funding for acute care services is provided by the state, however, it is bifurcated in that the funds are not directly controlled by the localities, and as a result, any savings cannot be reinvested in local community services.
 - Following the Virginia Tech incident, state law on involuntary hospitalization preadmission standards expanded to allow for a level of danger below imminent, however, it continues to require an assessment of "significantly dangerous <u>and</u> mentally ill". Without both elements being met, an individual cannot be hospitalized involuntarily.
 - The involuntary commitment process also involves legal aspects including: 1) an Emergency Commitment Order (ECO), which entails a hold by the police of an individual for a total of six hours to assess if clinical preadmission standards are met along with location of an available hospital bed, and 2) obtaining a Temporary Detention Order (TDO) from the magistrate, also within this same six-hour hold window. At times, the six-hour window runs out before all the criteria are met. In addition, the CSB Emergency Services has developed protocols for release including support systems and wrap around services.
 - Not all hospitals are willing to take involuntary admissions, and if unable to locate locally, efforts continue to find a bed outside the area. If a long distance bed is obtained, a two-person police escort is necessary for both transport to the facility as well as a return for a hearing.
 - Over the past year, the region has sent over 200 individuals out of the area for involuntary hospitalization, one-half of which are Fairfax residents. To place in context, it was noted during this same time period, there were several thousand individuals hospitalized and the majority of admissions are voluntary with a large percentage of those initially TDO'd, ultimately agreeing to the hospitalization.
 - The number of psychiatric beds in Northern Virginia are the lowest per capita in the state.

November 20, 2013 Page 2 of 6

- o In an effort to prevent escalation to the level of involuntary commitment and the need for beds, the CSB has several programs in place: 1) crisis stabilization, 2) two partial hospitalization programs, 3) a mobile crisis unit, 4) training provided to more than 30% of the police force in crisis intervention (CIT), 5) Program for Assertive Community Treatment (PACT), 6) jail diversion, and 7) intensive coordination treatment teams.
- Referencing the state run mental health facilities and bed availability, it was
 indicated individuals identified with civil extraordinary barriers and Not Guilty by
 Reason of Insanity (NGRI) occupy a significant portion of the beds and stay long
 term due to the security and resources necessary to release.

In response to a request, a fact sheet will be developed and distributed to Board members on this issue.

7. <u>Committee Reports</u>

A. Fiscal Oversight Committee:

In providing a committee report, Ms. Kern highlighted the following:

- Notes from the October committee meeting were provided to Board members along with a September fund statement.
- The FY2014 First Quarter Report to the Board of Supervisors (BOS) has been transmitted, and while there remains a shortfall in revenues, the yearend balance is projected to be positive, as expenditures will compensate.
- Efforts continue to review the contributing factors to the revenue shortfall.
- At the December committee meeting, Deputy County Executive Pat Harrison will be attending to provide an overview of the revenue maximization consultant report requested by the County Executive and all Board members are welcome to attend. It was requested that members unable to attend, receive the report.

B. Government and Community Relations Committee:

Ms. Woods reported that Rob Sweezy has agreed to be chair of the committee and as he was unable to participate in the November meeting, she is providing this month's report:

- In preparation for the visiting state legislative representatives, folders provided by the Virginia Association of Community Services Boards (VACSB) were made available and currently include VACSB budget priorities and the local regions' budget recommendations.
- A Critical Issues paper developed by the committee was provided in three draft formats and it was noted the issues are not prioritized. In addition, CSB talking points for each of the nine critical issues are being drafted and will be forwarded.
- A listing of legislator assignments was distributed and Board members were
 encouraged to work together if an exchange is preferred, or perhaps two members
 may wish to accompany each other on a visit. Board members were requested to
 notify Laura Yager of any revisions as well as provide an update of each visit in
 order to maintain a summary of activities.
- In response to why the LogistiCare transportation services were not among the critical issues, it was noted Fairfax County is moving forward to request a study by

November 20, 2013 Page 3 of 6

the Joint Legislative Audit and Review Commission, while at the same time, The Arc of Virginia is pursuing legislative action in this area. As this has been an ongoing priority concern that even recently has received direct CSB advocacy with legislators, it was agreed to add the issue to the paper.

C. Intellectual Developmental Disability Committee:

 Jessica Burmester reported after reviewing the TransCen consultant study recommendations, receiving input from providers over the summer in developing cost containment proposals, as well as options provided by staff, the committee has developed a statement, and with the Board's approval, a PowerPoint for presentation at the November 26th Board of Supervisors (BOS) Human Services Committee meeting. The committee's statement noted the following:

After receiving provider input and carefully considering the proposed cost containment options, the IDD Committee unanimously agreed at the November 7th meeting to not recommend the implementation of any new options at this time for the following reasons: 1) insufficient funds are generated to eliminate the wait list, 2) there is a projected adverse impact on individuals, families and providers, and 3) there is ongoing state reform of ID and DD Waivers for FY2016 that may include a new reimbursement rate structure. The committee agreed to recommend that the CSB find long term solutions to address the annualized growth in the program that occurs from incoming graduates and attrition. Such solutions may include enhanced promotion of self-directed services for appropriate individuals.

It was clarified this statement is solely for the CSB Board's adoption as an endorsement of the IDD Committee's recommendation which, in turn, provides guidance in developing the message to be conveyed to the BOS.

- A review of the draft PowerPoint distributed included scenarios of possible cost containment strategies that would eliminate any additional funding being needed.
 - The strategies initially submitted to the providers included furloughs, reduction of program enhancements and increase of self-directed services.
 - O After further review, the additional options developed were 1) cap county funding for new grads based on an amount related to Medicaid Waivers, 2) cap county funding available for new grads to the lowest provider rate for the service, 3) refer all new grads, except those with Medicaid Waivers, to self-directed services, and 4) establish a waiting list for all new grads.
 - It was noted the options presented would result in minimal savings while significantly impacting the individual receiving services.
 - o If additional funding is not received, rather than disrupting the services currently being received, wait lists will be established.
 - The conclusions proposed were: 1) acknowledgment of needed long term solutions to address growth, 2) current options reviewed do not provide significant cost avoidance vs. hardship to individuals served, 3) develop long term solutions to include self-directed services savings, and 4) await the state's waiver reform.

November 20, 2013 Page 4 of 6

- During this review, there was concern expressed in making any recommendations and/or endorsement of establishing wait lists. Instead, it was suggested historical evidence be presented of the BOS supported funding throughout the years. In addition for future discussion, it was indicated the full cost of funding the grads, including those anticipated for the upcoming year, be included in the baseline of the budget.
- Following further discussion, there was concern expressed that the current draft presentation does not account for the CSB Board taking responsibility for identifying any cost reductions.
- With this in mind, Kate Hanley offered a motion to revise the presentation to the BOS Human Services Committee to relay the following message:
 - As self-directed services appear to be a viable option, present this as a
 definitive proposal with the understanding that while the initial savings may
 be minimal, this is a long term strategy.
 - State that the CSB Board is aware this is a partial solution, but in examining other options over the last six months, it was determined the limited cost containment produced would cause significant upheaval and hardship on the individuals and families served.
 - The CSB Board recognizes with current funding, an immediate solution has not yet been identified to avoid a wait list, however, the CSB is committed to continuing to pursue the development of additional measures to address the costs.

The motion was seconded and passed.

- Rob Sweezy offered to draft a paper for presentation to the BOS that would capture the agreed upon message.
- In the days ahead, it was indicated the Board member to present to the BOS will be determined.

D. Substance Use Disorders/Mental Health (SUDs/MH) Committee:

Susan Beeman noted at the November committee meeting Jeannie Cummins Eisenhour presented information on the proposed zoning amendment on Residential Studio Units. In addition, Suzette Kern has offered to develop an initial draft to update the committee charter.

8. Action Items

A. CSB Policy Review:

Gary Ambrose noted during the comment period on the eight CSB Policies recommended for readoption, there were no public comments received. However, internally some revisions have been proposed to Policy 2205-Planning to align with current activities. Following this discussion, Mr. Ambrose moved the Board approve readoption of the eight CSB policies as presented, which was seconded and passed.

B. CSB Priority Population Guidelines:

Mr. Ambrose reported the priority guidelines for access to services were developed by CSB senior management leadership to ensure the service system is more flexible and

November 20, 2013 Page 5 of 6

responsive to people with multiple complex needs, while at the same time, recognizing limited resources. In addition to staff, guidance by a professional ethicist were applied and the document reviewed by a workgroup comprised of CSB Board members, staff as well as interested stakeholders. The next steps proposed are to issue the document for public comment, and it was noted due to the holidays, to extend the comment period to six weeks.

Following discussion, Mr. Ambrose offered a motion to approve a six-week public review and comment period for the CSB Priority Population Guidelines for Access to CSB services, which was seconded and passed.

There being no further business to come before the Board, a motion to adjourn was offered, seconded and carried. The meeting was adjourned at 10:40 p.m.

Action Taken--

- The October work session and meeting minutes were approved
- Eight CSB Policies were approved for readoption as presented.
- The draft CSB priority guidelines for access to services were approved for a sixweek public comment period.

December 18, 2013

Date

Staff to Board

November 20, 2013 Page 6 of 6